Express Mail No.: EL664600321US **PATENT** Attorney's Docket No. NC25565 COMBINED DECLARATION AND POWER OF ATTORNEY (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, **CONTINUATION OR C-I-P)** As a below named inventor, I hereby declare that: TYPE OF DECLARATION This declaration is of the following type: (check one applicable item below) original. design. supplemental. NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuationin-part application, do not check next item; check appropriate one of last three items. national stage of PCT. If one of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR C-I-P. divisional. continuation.

INVENTORSHIP IDENTIFICATION

continuation-in-part (C-I-P).

WARNING: If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below next to my name. I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

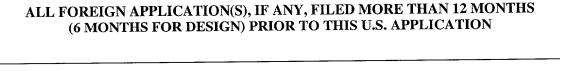
MOBILE STATION AND ELASTOMERIC COVER

SPECIFICATION IDENTIFICATION

the specification of which: [complete (a), (b) or (c)]
 (a) is attached hereto. (b) was filed on as Serial No. 0/ or Express Mail No., as Serial No. not yet known and was amended on (if applicable).
NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are no accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.
(c) was described and claimed in PCT International Application No filed on and as amended under PCT Article 19 on (if any).
ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.
I acknowledge the duty to disclose information which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56,
(check the following items, if desired)
and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and
in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 CFR 1.98.
PRIORITY CLAIM [35 U.S.C. § 119(a)–(d)]
I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)–(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed. [complete (d) or (e)] (d) \(\subseteq \) no such applications have been filed.
(e) such applications have been filed as follows.
NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)–(d)

COUNTRY (OR				
INDICATE IF	APPLICATION	DATE OF FILING	PRIORITY CL	
PCT)	NUMBER	(day, month, year)	UNDER 37 US	NO .
			☐ YES	NUL
			YES	NO
				210
			☐ YES	NO
				- TOC
			☐ YES	NO□
			YES	NO
				ПОШ
provisional applicatio	n(s) listed below: LICATION NUMBER	United States Code, § 11 FILIN	G DATE	
		_		
CLAIM		ARLIER US/PCT APPI R 35 U.S.C. 120	JCATION(S)	



NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Paul R. Juhasz	36,345
Brian T. Rivers	41,270
Robert C. Rolnik	37,995
Jerald J. Gnuschke	42,588
Allen Scott Lineberry	44,873
Milan Patel	41,242
Thomas B. Hayes	45,688
Jubin Dana	41,400
Steven A. Shaw	39,368
Linda Beach	36,446
Thomas R. Weber	41,547

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

Nokia Inc.

Attn: Robert C. Rolnik, Esq.

6000 Connection Drive Irving, TX 75039

DIRECT TELEPHONE CALLS TO:

(Name and telephone number)

Robert C. Rolnik (972) 894-5931

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

rum name of sole of the	St inventor		
Morris			HUMPHREYS
(GIVEN NAME)		(Middle Initial or Name)	Family or Last Name)
	11	- //	The state of the s
Inventor's Signature:	100	1 Huy	5
Date: 11/29/0	o	Country of Citizenship:	USA
<u> </u>		•	
Residence	Saginaw, Texas	USA	
Post Office Address	477 Meadow	As in the second	
	Saginaw, Texas 7	6179 USA	
	• • • • • •	<u></u>	
Full name of second jo	int inventor, if an	y	
Peter			LOPEZ
(GIVEN NAME)		(Middle Initial or Name)	Family or Last Name)
Inventor's Signature:			
Date: //24/00		Country of Citizenship:	USA
Residence	Frisco, Texas I	ISA	
Post Office Address	11101 Latimer	Drive	
1 Ost Office Address			
	Frisco, Texas 7	75034 USA	
E-U of third join	ot inventor if any		
Full name of third join	n inventor, it any		,
(CINTENI NIA NATE)		(Middle Initial or Name)	Family or Last Name)
(GIVEN NAME)		(Middle illidai of Name)	raining of East (value)
Inventor's Construe.			
Inventor's Signature:			
Date:		Country of Citizenship	
Residence			
Doct Office Address			
Post Office Address			

[check proper box(es) for any of the following added page(s) which form a part of this declaration]

	Signature for fourth and subsequent joint inventors. Number of pages added
	•••
	Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. <i>Number of pages added</i>
	•••
	Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added
	•••
	Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time (37 CFR 1.47). Number of pages added
	•••
	Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application. Number of pages added
	•••
of page	Authorization of attorney(s) to accept and follow instructions from representative. Number es added
	•••
	(If no further pages form a part of this Declaration, then end this Declaration with this page and check the following item:)
	☐This declaration ends with this page.